

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

COVER PAGE
460

Page 1 of 42

For Official Use Only

Statement covers period

from 07/01/2017

through 09/30/2017

Date of election if applicable:
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☒ General Purpose Committee
☒ Sponsored
☒ Small Contributor Committee
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
☒ Amendment (Explain below)

Update summary page and schedule A

- ☐ Quarterly Statement
☒ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
870169

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Southwest Regional Council of Carpenters Political Action Fund

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90071-</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95814-</u>	

OPTIONAL: FAX/E-MAIL ADDRESS
(213) 228-8454 / info@olsonhagel.com

Treasurer(s)

NAME OF TREASURER
Randy Thornhill

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90071-</u>	<u>(213) 228-8492</u>

NAME OF ASSISTANT TREASURER, IF ANY
Daniel Langford

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90071</u>	<u>(213) 228-8492</u>

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/24/2018 By Randy Thornhill
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/24/2018 By Randy Thornhill
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 07/01/2017 through 09/30/2017	CALIFORNIA FORM 460 Page 3 of 42 I.D. NUMBER 870169
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$153,535.00	\$456,870.00
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$153,535.00	\$456,870.00
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$153,535.00	\$456,870.00

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$120,456.52	\$825,534.72
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$120,456.52	\$825,534.72
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(\$472.01)	\$5,236.45
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$119,984.51	\$830,771.17

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$552,243.90	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$153,535.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.01	
15. Cash Payments	Column A, Line 8 above	\$120,456.52	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$585,322.39	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$5,236.45

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	07/01/2017	
through	09/30/2017	Page 4 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. Number 870169

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$0.00

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$0.00
2. Amount received this period - unitemized contributions of less than \$100	\$153,535.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$153,535.00

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

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Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 07/01/2017
through 09/30/2017

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FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

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Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2017</u> through <u>09/30/2017</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2017</u> through <u>09/30/2017</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period

from 07/01/2017

through 09/30/2017

CALIFORNIA
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER

870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/26/2017	Payee Name: Chad Mayes for Assembly 2018 Candidate Name: Chad Mayes State Assembly Person District 42 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$7,000.00	2018P: \$7,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/26/2017	Payee Name: Sebastian Ridley-Thomas for Assembly 2018 Candidate Name: Sebastian Ridley-Thomas State Assembly Person District 54 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	2018P: \$2,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/26/2017	Payee Name: Jeffrey Prang for Assessor 2018 Candidate Name: Jeffrey Prang Assessor Jurisdiction: Los Angeles County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$109,124.65
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$109,124.65

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

through 09/30/2017

**CALIFORNIA
FORM 460**

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NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/27/2017	Payee Name: McDonnell for LA County Sheriff 2018 Candidate Name: Jim McDonnell Sheriff-Coroner Jurisdiction: Los Angeles County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,800.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Bocanegra for Assembly 2018 Candidate Name: Raul Bocanegra State Assembly Person District 39 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	2018P: \$2,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Adrin Nazarian for Assembly 2018 Candidate Name: Adrin Nazarian State Assembly Person District 46 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Bloom for Assembly 2018 Candidate Name: Richard Bloom State Assembly Person District 50 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$4,000.00	\$8,000.00	2018P: \$8,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/17/2017	Payee Name: Todd Gloria for Assembly 2018 Candidate Name: Todd Gloria State Assembly Person District 78 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Huizar Officeholder Account Candidate Name: Jose Huizar (O) City Council Member District 14 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$800.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Councilmember Curren Price Officeholder Account 2013 Candidate Name: Curren Price (O) City Council Member District 9 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$800.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Joe Buscaino City Council, 2011, Officeholder Candidate Name: Joe Buscaino (O) City Council Member District 15 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$800.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

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NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/29/2017	Payee Name: Melissa Fox for County Central Committee 2020 Candidate Name: Melissa Fox Board Member Jurisdiction: Orange Co. Dem. Party, AD 68	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/29/2017	Payee Name: Wesson Officeholder Account Candidate Name: Herb Wesson (O) City Council Member District 10 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$800.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Steven Bradford for Senate 2020 Candidate Name: Steven Bradford State Senator District 35 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$10,500.00	2020P: \$8,800.00 2020G: \$1,700.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Steven Bradford for Senate 2020 Candidate Name: Steven Bradford State Senator District 35 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,700.00	\$10,500.00	2020P: \$8,800.00 2020G: \$1,700.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>12</u> of <u>42</u>

NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund	I.D. NUMBER 870169
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Stern for Senate 2020 Candidate Name: Henry Stern State Senator District 27 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	2020P: \$2,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	California Democratic Party	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$5,000.00	\$15,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Betty Yee for Controller 2018 Candidate Name: Betty Yee State Controller Jurisdiction: Statewide	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$500.00	\$3,000.00	2018P: \$3,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	California Latino Caucus Leadership PAC	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$3,000.00	\$3,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>13</u> of <u>42</u>
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Cristina Garcia for Assembly 2018 Candidate Name: Cristina Garcia State Assembly Person District 58 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,300.00	\$10,000.00	2018P: \$8,800.00 2018G: \$1,200.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Cristina Garcia for Assembly 2018 Candidate Name: Cristina Garcia State Assembly Person District 58 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$200.00	\$10,000.00	2018P: \$8,800.00 2018G: \$1,200.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Councilmember Cedillo Officeholder Account 2013 Candidate Name: Gil Cedillo (O) City Council Member District 1 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Democratic Party of Orange County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$3,500.00	\$4,300.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>14</u> of <u>42</u>
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Gipson for Assembly 2018 Candidate Name: Mike Gipson State Assembly Person District 64 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$4,000.00	2018P: \$4,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Todd Gloria for Assembly 2018 Candidate Name: Todd Gloria State Assembly Person District 78 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Matt Dababneh for Assembly 2018 Candidate Name: Matt Dababneh State Assembly Person District 45 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$3,500.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Eloise Reyes for Assembly 2018 Candidate Name: Eloise Reyes State Assembly Person District 47 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>15</u> of <u>42</u>
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Miguel Santiago for Assembly 2018 Candidate Name: Miguel Santiago State Assembly Person District 53 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$4,500.00	2018P: \$4,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Dr. Weber for Assembly 2018 Candidate Name: Dr. Shirley Weber State Assembly Person District 79 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$3,500.00	\$5,000.00	2018P: \$5,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Adrin Nazarian for Assembly 2018 Candidate Name: Adrin Nazarian State Assembly Person District 46 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Lorena Gonzalez for Assembly 2018 Candidate Name: Lorena Gonzalez State Assembly Person District 80 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

through 09/30/2017

CALIFORNIA
FORM 460

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NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Ben Hueso for Senate 2018 Candidate Name: Ben Hueso State Senator District 40 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$7,000.00	2018P: \$7,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Jones-Sawyer for Assembly 2018 Candidate Name: Reggie Jones-Sawyer State Assembly Person District 59 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Limon for Assembly 2018 Candidate Name: Monique Limon State Assembly Person District 37 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Chad Mayes for Assembly 2018 Candidate Name: Chad Mayes State Assembly Person District 42 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$7,000.00	2018P: \$7,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>17</u> of <u>42</u>
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: O'Donnell for Assembly 2018 Candidate Name: Patrick O'Donnell State Assembly Person District 70 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$5,000.00	2018P: \$5,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Laura Friedman for Assembly 2018 Candidate Name: Laura Friedman State Assembly Person District 43 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Blanca Rubio for Assembly 2018 Candidate Name: Blanca Rubio State Assembly Person District 48 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,000.00	\$6,000.00	2018P: \$6,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Heywood for Anaheim Elementary School Board 2018 Candidate Name: David Heywood Board Member Jurisdiction: Anaheim Elementary School Dist.	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

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NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/7/2017	Payee Name: Jan Harnik for Supervisor 2018 Candidate Name: Jan Harnik County Supervisor District 4 Jurisdiction: Riverside County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$2,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Payee Name: Friends of John McMahon for SB County Sheriff-Coroner-2018 Candidate Name: John McMahon Sheriff-Coroner Jurisdiction: Santa Barbara County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/7/2017	Democrats for Israel State PAC	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/13/2017	Payee Name: Rocky Chavez for Assembly 2018 Candidate Name: Rocky Chavez State Assembly Person District 76 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$5,900.00	2018P: \$5,900.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2017</u>		
through <u>09/30/2017</u>		Page <u>19</u> of <u>42</u>
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/18/2017	Payee Name: McDonnell for LA County Sheriff 2018 Candidate Name: Jim McDonnell Sheriff-Coroner Jurisdiction: Los Angeles County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Void Check	(\$1,800.00)	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/18/2017	Payee Name: McDonnell for LA County Sheriff 2018 Candidate Name: Jim McDonnell Sheriff-Coroner Jurisdiction: Los Angeles County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/28/2017	Payee Name: Connie M. Leyva for Senate 2018 Candidate Name: Connie M. Leyva State Senator District 20 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$8,000.00	2018P: \$8,800.00 2018G: \$200.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/28/2017	Payee Name: Connie M. Leyva for Senate 2018 Candidate Name: Connie M. Leyva State Senator District 20 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$200.00	\$8,000.00	2018P: \$8,800.00 2018G: \$200.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 20 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/28/2017	Payee Name: Mark Vargas for Assembly 2017 Candidate Name: Mark Vargas State Assembly Person District 51 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$975.00	\$975.00	2017S: \$975.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/29/2017	Mark Ridley-Thomas Committee for a Better LA	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$20,000.00	\$20,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/29/2017	Payee Name: Cristina Garcia for Assembly 2018 Candidate Name: Cristina Garcia State Assembly Person District 58 Jurisdiction: Assembly District	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000.00	\$10,000.00	2018P: \$8,800.00 2018G: \$1,200.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/29/2017	Payee Name: Krekorian for City Council 2009 Officeholder Candidate Name: Paul Krekorian (O) City Council Member District 2 Jurisdiction: City of Los Angeles	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$800.00	\$1,600.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

through 09/30/2017

**CALIFORNIA
FORM 460**

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/29/2017	Payee Name: Joe Kerr for Supervisor 2018 Candidate Name: Joe Kerr County Supervisor District 4 Jurisdiction: Orange County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/29/2017	Payee Name: Ridley-Thomas Officeholder Account Candidate Name: Mark Ridley-Thomas (O) County Supervisor District 2 Jurisdiction: Los Angeles County	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/29/2017	Payee Name: Hertzberg for Senate 2018 Candidate Name: Robert Hertzberg State Senator District 18 Jurisdiction: Senate	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$2,500.00	\$9,500.00	2018P: \$8,800.00 2018G: \$5,700.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/1/2017	Kern County Democratic Central Committee	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Meeting Space	\$116.55	\$1,048.95	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/1/2017	Kern County Democratic Central Committee	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Meeting Space	\$116.55	\$1,048.95	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/1/2017	Kern County Democratic Central Committee	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Meeting Space	\$116.55	\$1,048.95	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$109,124.65

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 07/01/2017 through 09/30/2017	CALIFORNIA FORM 460
Page 23 of 42	I.D. NUMBER 870169

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Olson Hagel and Fishburn LLP Sacramento, CA 95814	PRO			\$2,159.49
Chad Mayes for Assembly 2018 Riverside, CA 92506	CTB			\$2,000.00
Committee ID: 1392882 Sebastian Ridley-Thomas for Assembly 2018 Sacramento, CA 95814	CTB			\$2,500.00
Committee ID: 1392907				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$120,456.52
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$120,456.52

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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through 09/30/2017		Page 24 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jeffrey Prang for Assessor 2018 Los Angeles, CA 90004	CTB			\$1,000.00
Committee ID: 1396928				
McDonnell for LA County Sheriff 2018 Encino, CA 91435	CTB			\$1,800.00
Committee ID: 1393521				
Jimmy Elrod Corona, CA 92883			Travel Expenses	\$821.66
Olson Hagel and Fishburn LLP Sacramento, CA 95814	PRO			\$1,449.16
Bocanegra for Assembly 2018 Sacramento, CA 95814	CTB			\$2,500.00
Committee ID: 1392792				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 25 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

SEE INSTRUCTIONS ON REVERSE

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Adrin Nazarian for Assembly 2018 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1392480 Bloom for Assembly 2018 Sacramento, CA 95814	CTB			\$4,000.00
Committee ID: 1392468 Todd Gloria for Assembly 2018 Encinitas, CA 92024	CTB			\$2,000.00
Committee ID: 1392977 Huizar Officeholder Account Los Angeles, CA 90017	CTB			\$800.00
Committee ID: 1277167 Councilmember Curren Price Officeholder Account 2013 Los Angeles, CA 90017	CTB			\$800.00
Committee ID: 1359453				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
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NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joe Buscaino City Council, 2011, Officeholder Los Angeles, CA 90017	CTB			\$800.00
Committee ID: 1342959 Melissa Fox for County Central Committee 2020 Irvine, CA 92604	CTB			\$1,500.00
Committee ID: 1396322 Wesson Officeholder Account Long Beach, CA 90814	CTB			\$800.00
Committee ID: 1277458 Quintana-Saragosa Public Affairs Sacramento, CA 95814	CNS			\$4,000.00
Quintana-Saragosa Public Affairs Sacramento, CA 95814	CNS			\$2,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 07/01/2017 through 09/30/2017		CALIFORNIA FORM 460 Page 27 of 42
I.D. NUMBER 870169		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Steven Bradford for Senate 2020 Sacramento, CA 95814	CTB			\$800.00
Committee ID: 1394302				
Steven Bradford for Senate 2020 Sacramento, CA 95814	CTB			\$1,700.00
Committee ID: 1394302				
Stern for Senate 2020 Sacramento, CA 95815	CTB			\$2,500.00
Committee ID: 1392385				
California Democratic Party Sacramento, CA 95811	CTB			\$5,000.00
Committee ID: 741666				
Betty Yee for Controller 2018 Encino, CA 91436	CTB			\$500.00
Committee ID: 1374814				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 28 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
California Latino Caucus Leadership PAC Sacramento, CA 95814	CTB			\$3,000.00
Committee ID: 1321501 Cristina Garcia for Assembly 2018 Orange, CA 92865	CTB			\$2,300.00
Committee ID: 1393064 Cristina Garcia for Assembly 2018 Orange, CA 92865	CTB			\$200.00
Committee ID: 1393064 Councilmember Cedillo Officeholder Account 2013 Los Angeles, CA 90010	CTB			\$800.00
Committee ID: 1360884 Democratic Party of Orange County Orange, CA 92868	CTB			\$3,500.00
Committee ID: 742006				

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 29 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gipson for Assembly 2018 Sherman Oaks, CA 91423	CTB			\$1,500.00
Committee ID: 1392828				
Todd Gloria for Assembly 2018 Encinitas, CA 92024	CTB			\$2,500.00
Committee ID: 1392977				
Matt Dababneh for Assembly 2018 Sacramento, CA 95814	CTB			\$3,500.00
Committee ID: 1393201				
Eloise Reyes for Assembly 2018 Sacramento, CA 95814	CTB			\$2,000.00
Committee ID: 1393341				
Miguel Santiago for Assembly 2018 Sherman Oaks, CA 91423	CTB			\$2,000.00
Committee ID: 1392439				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 30 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Dr. Weber for Assembly 2018 San Marcos, CA 92069	CTB			\$3,500.00
Committee ID: 1393376				
Adrin Nazarian for Assembly 2018 Sacramento, CA 95814	CTB			\$2,000.00
Committee ID: 1392480				
Lorena Gonzalez for Assembly 2018 Encinitas, CA 92024	CTB			\$2,000.00
Committee ID: 1392494				
Ben Hueso for Senate 2018 Encinitas, CA 92024	CTB			\$2,000.00
Committee ID: 1373761				
Jones-Sawyer for Assembly 2018 Inglewood, CA 90301	CTB			\$2,000.00
Committee ID: 1392700				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 31 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Limon for Assembly 2018 Sacramento, CA 95815	CTB			\$2,000.00
Committee ID: 1392511				
Chad Mayes for Assembly 2018 Riverside, CA 92506	CTB			\$2,000.00
Committee ID: 1392882				
O'Donnell for Assembly 2018 Long Beach, CA 90807	CTB			\$1,000.00
Committee ID: 1393597				
Laura Friedman for Assembly 2018 Encino, CA 91436	CTB			\$2,000.00
Committee ID: 1392556				
Blanca Rubio for Assembly 2018 Sacramento, CA 95815	CTB			\$2,000.00
Committee ID: 1393364				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 32 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Heywood for Anaheim Elementary School Board 2018 Long Beach, CA 90802	CTB			\$1,000.00
Committee ID: 1366504 Jan Harnik for Supervisor 2018 Riverside, CA 92506	CTB			\$1,000.00
Committee ID: 1395155 Friends of John McMahon for SB County Sheriff-Coroner-2018 Redlands, CA 92373	CTB			\$2,500.00
Committee ID: 1374332 Democrats for Israel State PAC Long Beach, CA 90802	CTB			\$500.00
Committee ID: 1342901 Rocky Chavez for Assembly 2018 Sacramento, CA 95814	CTB			\$1,500.00
Committee ID: 1392924				

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Schedule E (Continuation Sheet) Payments Made

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Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
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Olson Hagel and Fishburn LLP Sacramento, CA 95814	PRO			\$1,251.21
McDonnell for LA County Sheriff 2018 Encino, CA 91435	CTB		Void Check	(\$1,800.00)
Committee ID: 1393521 McDonnell for LA County Sheriff 2018 Encino, CA 91435	CTB			\$1,500.00
Committee ID: 1393521 Connie M. Leyva for Senate 2018 Santa Ana, CA 92703	CTB			\$800.00
Committee ID: 1374053 Connie M. Leyva for Senate 2018 Santa Ana, CA 92703	CTB			\$200.00
Committee ID: 1374053				

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Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 09/30/2017		Page 34 of 42
NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mark Vargas for Assembly 2017 Los Angeles, CA 90042	CTB			\$975.00
Committee ID: 1397902 Mark Ridley-Thomas Committee for a Better LA Los Angeles, CA 90017	CTB			\$20,000.00
Committee ID: 1372330 Cristina Garcia for Assembly 2018 Orange, CA 92865	CTB			\$1,000.00
Committee ID: 1393064 Krekorian for City Council 2009 Officeholder Los Angeles, CA 90004	CTB			\$800.00
Committee ID: 1318897 Joe Kerr for Supervisor 2018 Long Beach, CA 90802	CTB			\$500.00
Committee ID: 1395220				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Southwest Regional Council of Carpenters Political Action Fund		I.D. NUMBER 870169

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NAME OF FILER
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ridley-Thomas Officeholder Account Los Angeles, CA 90067	CTB			\$1,500.00
Committee ID: 1314252 Hertzberg for Senate 2018 Sacramento, CA 95814	CTB			\$2,500.00
Committee ID: 1373423				

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SUBTOTAL \$120,456.52

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
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through 09/30/2017

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NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Southwest Regional Council of Carpenters Los Angeles, CA 90071	CTB Office space for phonebanks; In-kind to Monica Rodriguez for City Council 2017 - General (#1395159)	\$187.50	\$0.00	\$0.00	\$187.50
Carpenters Local 743 Bakersfield, CA 93301	CTB Meeting Space; In-kind to Kern County Democratic Central Committee (#741996)	\$349.65	\$0.00	\$0.00	\$349.65
Carpenters Local 743 Bakersfield, CA 93301	CTB Meeting Space; In-kind to Kern County Democratic Central Committee (#741996)	\$349.65	\$0.00	\$0.00	\$349.65

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$4,349.65
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$4,821.66
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** (\$472.01)
May be a negative number.

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2017
through 09/30/2017

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FORM **460**

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NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Carpenters Local 743 Bakersfield, CA 93301	CTB Meeting Space; In-kind to Kern County Democratic Central Committee (#741996)	\$0.00	\$116.55	\$0.00	\$116.55
Carpenters Local 743 Bakersfield, CA 93301	CTB Meeting Space; In-kind to Kern County Democratic Central Committee (#741996)	\$0.00	\$116.55	\$0.00	\$116.55
Jimmy Elrod Corona, CA 92883	Travel Expenses	\$821.66	\$0.00	\$821.66	\$0.00
Quintana-Saragosa Public Affairs Sacramento, CA 95814	CNS	\$4,000.00	\$0.00	\$4,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2017
through 09/30/2017

**CALIFORNIA
FORM 460**

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NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Carpenters Local 743 Bakersfield, CA 93301	CTB Meeting Space; In-kind to Kern County Democratic Central Committee (#741996)	\$0.00	\$116.55	\$0.00	\$116.55
Quintana-Saragosa Public Affairs Sacramento, CA 95814	CNS	\$0.00	\$4,000.00	\$0.00	\$4,000.00
SUBTOTALS		\$5,708.46	\$4,349.65	\$4,821.66	\$5,236.45

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 07/01/2017
through 09/30/2017

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

TOTAL*

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from 07/01/2017 through 09/30/2017	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER
870169

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 07/01/2017

through 09/30/2017

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FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Southwest Regional Council of Carpenters Political Action Fund

I.D. NUMBER

870169

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$0.00

Schedule I Summary

1. Increases to cash of \$100 or more this period.....	\$0.00
2. Unitemized increases to cash under \$100 this period.	\$0.01
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	TOTAL \$0.01

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference:
Schedule A - Southwest Regional Council of Carpenters, 533 South Fremont Avenue, 10th Floor, Los Angeles, CA 90071, is the intermediary for all contributions.
